## City of Muskegon BLOCK PARTY PETITION

APPLICANT'S NAME(S)		
BLOCK PARTY DATE	Must be between May 1 and October 30	
TIME OF BLOCK PARTY	START: END:  Start and end times must be during daylight hours	
STREET TO BE CLOSED		
BETWEEN WHICH STREETS (limited to one block only)	STREET NAME:	
	STREET NAME:	

We, the undersigned, have been notified that the applicant(s) listed above is/are organizing a block party to be held on the street I/we live on. By signing this petition, I/we indicate that we are <u>not</u> opposed to the event and understand that the street listed above will be closed to vehicular traffic during the times of the party shown above.

Printed name & signature of block resident	<u>Address</u>
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Use back of sheet for additional signatures if necessary.

If you have concerns about the City of Muskegon approving this block party or if you have questions about the block party permitting process, please contact the Planning Department at (231) 724-6702.